



## APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE  
DEPARTMENT OF ARCHIVES AND HISTORY  
RECORDS MANAGEMENT DIVISION

**INSTRUCTIONS:** See Publication No. 76-RM-1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date	1. Agency Address Department of Education Office of Vocational Education Atlanta, Georgia 30334	Application Number <b>81-133-A</b>	
Application Number		Date Received <b>SEP 25 1981</b>	Date Completed <b>OCT 26 1981</b>
2. Person to Contact Gail Wingo		Working Title Administrative Secretary	Telephone Number 656-6711
3. Action Requested a. <input type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input checked="" type="checkbox"/> Amend Application No. <u>81-133</u> Check One: <input checked="" type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest _____ Latest _____ No Change		5. Records Series Title (followed by title used in office, if different) Change	
6. Division and Office Function What is the function of the Division and the Office in which this record series is created?  <u>No Change</u>			
7. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.  Documents relating to:  Included are: <u>No Change</u>  File is arranged:			
8. Monthly Reference Rate How often are records referred to which are: One to six months old _____; Seven to twelve months old _____; Thirteen to twenty-four months old _____; twenty-five months and older _____?			
9. Annual Rate of Accumulation of Records Letter-size drawers _____; Legal-size drawers _____; Shelves _____; Other (specify) _____			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
		a. Is this the official copy of the series? If not, where is it?
		b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
		c. Is this a vital record?
		d. Does this series have historical or long term research value?
		e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
		f. Is the information contained in this series ever published? If yes, attach copy.
		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
		h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
		i. Is this series (or a major portion of it) regularly microfilmed?
		j. Does the record series result in a computer printout?

**11. Retention Requirements** The following requires the series to be kept:

a. State Law	_____ years.	d. Audit period	_____ years.
b. Statute of limitation	_____ years.	e. Administrative need	_____ years.
c. Federal law	_____ years.	f. Federal retention instructions	_____ years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

**12. Approved Disposition Instructions** This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☒ Fiscal Year; ☐ Other \_\_\_\_\_ then,

☒ Hold in the current files area \_\_\_\_\_ month(s) \_\_\_\_\_ year(s); then

☐ Transfer to local holding area; hold \_\_\_\_\_ year(s); then

☐ Transfer to State Records Center; hold \_\_\_\_\_ year(s); then

☐ Destroy.

☒ Transfer to State Archives for permanent retention.

☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>A. Weyman Culp</i>	9/24/81	Walker L. Baumgardner	9/24/81
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		State Auditor/Designee	9-28-81
		Secretary of State/Designee	9-28-81
		Attorney General/Designee	10-1-81



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FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date	1. Agency Address Department of Education Office of Vocational Education Atlanta, Georgia 30334	Application Number <b>81-133</b>	
Application Number		Date Received <b>FEB 24 1981</b>	Date Completed <b>FEB 27 1981</b>
2. Person to Contact <b>Faye G. Craig</b>		Working Title <b>Administrative Secretary</b>	Telephone Number <b>656-6711</b>
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest      Latest <b>1972</b> To Date		5. Records Series Title (followed by title used in office, if different) <b>OVE Local Education Agency Correspondence Files</b>	
6. Division and Office Function      What is the function of the Division and the Office in which this record series is created? The Office of Vocational Education (OVE) is responsible for providing executive management and leadership for the state vocational education program; for the development, execution and maintenance of the state plan for vocational education; and for assisting the 187 school system and 24 area vocational technical institutions in providing effective vocational education programs that meet the needs of local communities throughout Georgia.			
7. Record Series Description      This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.  Documents relating to: <b>administering vocation programs in local education agencies.</b>  Included are: <b>correspondence, memoranda, etc. to and from local school systems, CESAs, area vocational technical schools and junior colleges concerning current and proposed policies, programs, budgets and meetings; position papers; reports; and other documents relating to the general administration of vocational education.</b>  File is arranged: <b>chronologically by fiscal year; thereunder by type LEA; thereunder alphabetically.</b>			
8. Monthly Reference Rate      How often are records referred to which are: One to six months old <u>seldom</u> ; Seven to twelve months old <u>seldom</u> ; Thirteen to twenty-four months old <u>seldom</u> ; twenty-five months and older <u>0</u> ?			
9. Annual Rate of Accumulation of Records Letter-size drawers <u>3/4</u> ; Legal-size drawers _____; Shelves _____; Other (specify) _____			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
X		d. Does this series have historical or long term research value?
N/A		e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
	X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

#### 11. Retention Requirements

The following requires the series to be kept:

- |                          |              |                                   |                |
|--------------------------|--------------|-----------------------------------|----------------|
| a. State Law             | _____ years. | d. Audit period                   | _____ years.   |
| b. Statute of limitation | _____ years. | e. Administrative need            | 2 _____ years. |
| c. Federal law           | _____ years. | f. Federal retention instructions | _____ years.   |

Attach copy or excerpt of laws or regulations. Explain administrative need.

#### 12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☒ Fiscal Year; ☐ Other \_\_\_\_\_ then,

- ☒ Hold in the current files area \_\_\_\_\_ month(s) 2 \_\_\_\_\_ year(s); then
- ☐ Transfer to local holding area; hold \_\_\_\_\_ year(s); then
- ☐ Transfer to State Records Center; hold \_\_\_\_\_ year(s); then
- ☐ Destroy.
- ☒ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>[Signature]</i>	2/23/81	Walker L. Baumgardner	2-23-81
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		State Auditor/Designee	<i>[Signature]</i> 2-26-81
		Secretary of State/Designee	Carroll Hart 2-26-81
		Attorney General/Designee	<i>[Signature]</i> 2-27-81